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CONFIRMATION NO. 7552

<b>SERIAL NUMBER</b> 10/727,908	<b>FILING OR 371(c) DATE</b> 11/30/2004 <b>RULE</b>	<b>CLASS</b> 623	<b>GROUP ART UNIT</b> 3709	<b>ATTORNEY DOCKET NO.</b> 6061.1P
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**APPLICANTS**  
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**\*\* CONTINUING DATA \*\*\*\*\***  
 This application is a CON of 09/494,278 01/30/2000 PAT 7,077,867

**\*\* FOREIGN APPLICATIONS \*\*\*\*\***  
 none

**IF REQUIRED, FOREIGN FILING LICENSE GRANTED\*\* SMALL ENTITY \*\***  
 \*\* 03/15/2004

Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Examiner's Signature: <i>[Signature]</i> Initials: <i>Atw</i>	<b>STATE OR COUNTRY</b> UT	<b>SHEETS DRAWING</b> 44	<b>TOTAL CLAIMS</b> 39	<b>INDEPENDENT CLAIMS</b> 2
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**TITLE**  
 Prosthetic knee joint having at least one diamond articulation surface

<b>FILING FEE RECEIVED</b> 556	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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